PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

5000-5112

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY										
TÖTAL CLAIMS			18				٠.	RATE	FEE		RATE	FEE									
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375:00	OR	BASIC FEE	750.00									
TOTAL CHARGEABLE CLAIMS			/ 8 minus 20=		*	0		X\$ 9=		OR	X\$18=	. O =									
INDEPENDENT CLAIMS			√ minus 3 =		*	0		X42=		OR	X84=	0									
MULTIPLE DEPENDENT CLAIM PRESENT								+140=	er se g	OR	+280≒	o a									
* If the difference in column 1 is less than zero, enter "0" in colum						olumn 2		TOTAL		OR	TOTÁL	25/)									
CLAIMS AS AMENDED - PART II (Column 2) (Column 3)							- - <u>-</u>	SMALLE	ENTITY	or Or	OTHER SMALL!										
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
NDN	Total	*	Minus	**				X\$ 9=		OR	X\$18=										
AME	Independent	*	Minus *** JLTIPLE DEPENDENT		COL ALLA			X42=		OR	X84=										
	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	CLAIM]	+140=		OR	+280=										
Å.							-	TOTAL ADDIT. FEE	- Sant 14 3	OR	TOTAL ADDIT. FEE										
		(Column 1)	Mr v. E. S. I.	(Colui		(Column 3)		ADDII. 1 EE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	3	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
NDN	Total	* 2	Minus	. **		=]	X\$ 9=		OR	X\$18=										
AME	Independent	* NTATION OF MI	Minus	*** PENDENT	T CL AINA	CI AIM		X42=		OR	X84=	1									
	FINOLFRESE	NIATION OF W	OLTIPLE DEF	EINDEIN	CLAIIVI			+140=		OR	+280=	*									
					2 22 22 22 22 22 22 22 22 22 22 22 22 2		٠	TOTAL ADDIT. FEE	- 10 m	OR	TOTAL ADDIT: FEE										
		(Column 1)		(Colu		(Column 3)				7 7 8 - 3											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RÅTE	ADDI- TIONAL FEE									
NON	Total		Minus -	**************************************		= *	* V.	X\$ 9=		OR	X\$18=										
AME	Independent	*	Minus	z. ** *	. ' . '	= 4	# # **	X42= **		OR	X84j= \										
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140≒		OR	+280=	1									
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL										
***	If the "Highest Nu	mber Previously F	aid For" IN THI	S SPACE	is less tha	ın 3, enter "3."			propriate bo	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											